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02/25/2010

KLARQUIST SPARKMAN, LLP 121 S.W. SALMON STREET SUITE 1600 PORTLAND, OR 97204 FILED VIA EFS ON APRIL 15, 2010

| APPLICATION NO. | FILING DATE | | FIRST NAMED INVENTOR | | ATTORNEY DOCKET NO. | CONFIRMATION NO. | | | | | | | |
|---|--|--|---|---|---|--|------------------|--------------------------|--------------------------|--------------------------------|----------------------|----------------------------|-----------------------------|
| 10/554,139 02/01/2008 | | | Sherif Ahmed Hammouda | | 1011-72254-01 3186 | | | | | | | | |
| TITLE OF INVENTION | : ANALOG DESIGN R | ETARGETING | | | | | | | | | | | |
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| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE | FEE TOTAL FEE(S) DU | E DATE DUE | | | | | | | |
| nonprovisional | МО | \$1510 | \$300 | \$0 | \$1810 | 05/25/2010 | | | | | | | |
| EXAMINER | | ART UNIT | CLASS-SUBCLASS | | | | | | | | | | |
| LIN, SUN J | | 2825 | 716-003000 | | | | | | | | | | |
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | | on the patent front page, list Klarquist Sparkman, LLP | | | | | | | | | |
| | | | (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | | | | | | | |
| | | | | | | | | ND RESIDENCE DATA | TO BE PRINTED ON | L THE PATENT (print or type | | | |
| | | | | | | | PLEASE NOTE: Unl | ess an assignee is ident | ified below, no assignee | data will appear on the pa | atent. If an assigno | e is identified below, the | document has been filed for |
| PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) | | | | | | | | | | | | | |
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| Please check the appropri | ate assignee category or | categories (will not be pr | inted on the patent): | Individual Co | rporation or other private g | roup entity Government | | | | | | | |
| 4a. The following fec(s) are submitted: | | | 1b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) | | | | | | | | | | |
| ☑ Issue Fee | | | ☑ Paid electronically herewith is \$1,810 | | | | | | | | | | |
| ☑ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies | | | Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the toguired lee(s), any deficiency, or credit any overpayment, to Deposit Account Number 02-4350 | | | | | | | | | | |
| | | | overpayment, to Depos | it Account Number | 02-4550 | entitionery, or crount any | | | | | | | |
| 5. Change in Entity Stat | • | • | The Applicant is no long | 1-ii CMAX | L ENTITY status. See 37 (| CER LAST VAN | | | | | | | |
| | SMALL ENTITY statu | | | | | | | | | | | | |
| interest as shown by the r | ceords of the United Sta | ics Patent and Trademark | Office. | | | the assignee or other party in | | | | | | | |
| Authorized Signature | Talor ? | n D | | Date Ar | oril 15, 2010 | | | | | | | | |
| Typed or printed name | | | | | 39,830 | | | | | | | | |
| This collection of informa an application. Confident submitting the completed this form and/or suggestic Box 1450, Alexandria, Vi Alexandria, Virginia 2231 Under the Paperwork Red | tion is required by 37 C lality is governed by 35 application form to the one for reducing this bur reginia 22313-1450. DO 3-1450. uction Act of 1995, no re | FR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR Corresons are required to reserve. | on is required to obtain or re 1.14. This collection is esti- depending upon the indivi- e Chief Information Office COMPLETED FORMS TO spond to a collection of info | ctain a benefit by the mated to take 12 m dual case. Any con r, U.S. Patent and T THIS ADDRESS. | e public which is to file (an inutes to complete, including the first on the amount of the rademark Office, U.S. Deg SEND TO: Commissioner isplays a valid OMB control. | nd by the USPTO to process) ng gathering, preparing, and ime you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450, of number. | | | | | | | |